Why are our wants so very few?
Because we not [illegible]'s calls pursue.
Whence our complacency of mind?
Because we act our parts assign'd.
Have we incessant tasks to do?
Is not all nature busy too?
Does not the sun with constant pace
Persist to run his annual race?
Do not the stars which shine so bright,
Renew their courses ev'ry night?
Does not the ox obedient bow
His patient neck, and draw the plough?
Or when did e'er the gen'rous steed
Withhold his labour or his speed?

COTTON.

SECTION VI.

The Dove.

Reas'[illegible] at ev'ry step he treads,
Man yet mistakes his way,
While meaner things, whom instinct leads,
Are rarely known to stray.

One silent eve[illegible] wander'd [illegible]
And hear'd the voice of [illegible]
The turtle thus address'd her [illegible]
And sooth'd the list'ning dove:—

"Our mutual bond of faith and truth
[illegible] time shall disengage;

SECTION III.

[illegible]ded.

[illegible] bite;
[illegible];
[illegible] fight,

[illegible] ever let

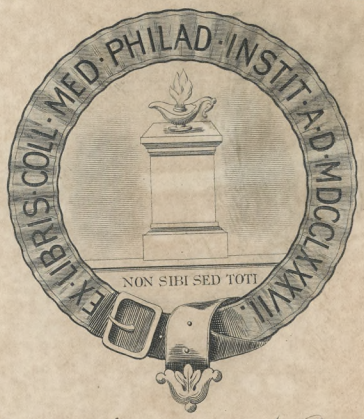
[illegible] made

[illegible]
[illegible]ns run,
[illegible]ld;
[illegible] Son,
[illegible]ld.
[illegible]ge;

[illegible]th man,
And God his Father too.

The Lord of all who reigns above,
Does from his heavenly throne,
Behold what children dwell in love,
And marks them for his own.

WATTS.



Chapman's Lectures

Volume 10th.

Occasionally we are called to encounter cases of Dyspepsia, which evidently arise from the employment of spirituous liquors. These are marked by extreme debility of the stomach, nausea and vomiting, great flatulence, and a loss of appetite. If any aliment is taken, it is immediately rejected, or is imperfectly digested. Such a state of the system may be suddenly induced, and in this case, may be quickly relieved by the use of moderately stimulating drinks, opium, and cordial nourishment. But we more generally meet with it as the consequence of long continued & habitual intemperance, and under such circumstances it is more difficult of cure. Dissections ~~generally~~ reveal to us much organic injury of the stomach. The internal surface is ~~smooth~~, glass like, and polished, the irregularities of the villous coat having been absorbed from the constant irritation which was applied to the mouths of the lymphatics. — The treatment consists in palliating the more urgent symptoms, as gastric irritation, vomiting, and ~~spasm~~ of the severe spasms which ~~distr~~ distress the patient. Many of the remedies before mentioned are also applicable here. But though they produce some good effect, yet the more active

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stimulants are demanded; such as opium, volatile alkali, the musk julap, garlick, ~~camphor~~ and asafoetida. Cordial drinks, & nourishing diet must also be allowed. By the use of the antispasmodics, the nervous system recovers its tone and health. But a permanent cure is only to be obtained by a complete reformation ~~of~~ in the habits of the individual, and, after the strength has ~~ha~~ been somewhat recruited, by the use of such medicines as are calculated to remove visceral disease.—

Little however will our medicines avail us in this or any other form of Dyspepsia, unless we attend also to the diet, and other auxiliary means. As the stomach is the seat of the disease, and the receptacle of food, nothing need be said to enforce on you the necessity of employing such aliment as is least offensive to that organ, and requires the slightest exercise of its digestive power, in its crippled and disordered condition. Compared with all others, a milk diet, in every case, is decidedly to be preferred. We may by this means often effect a cure where ~~all~~ every ~~other resources have been used~~ course of treatment has failed. That milk, however, may prove effectual, the patient must live ~~entirely on it~~, exclusively on it, not even bread being allowed in those instances where there is great irri=

tation of the stomach. It must be taken frequently during the day, and is best when obtained immediately from the cow. This diet is applicable both to the simple forms of Indigestion, and to those which are complicated with other affections, as Gastrodynia, Pyrosis, and Cardialgia. It is admitted on all hands that no diet is ~~so~~ better suited to cases of water-brash than ~~the~~ one of Milk. In Cardialgia it is also confessedly advantageous, and I have likewise seen it very serviceable in Gastrodynia. Milk seems, indeed, to be possessed of some extraordinary power over spasmodic affections of the stomach. More than once I have known it to relieve violent spasms of the stomach from Retrocedent Gout, and also from Flatulent Colic. The late Colonel Williams of the engineer corps was the victim of retrocedent gout. He found nothing so effectual in relieving the pain as large draughts of new milk. This same effect was also experienced by the late Mr. Dallas. Colonel Williams was ultimately cured by the long use of milk. I could enumerate many cases illustrative of the advantages of this practice. It is objected to a milk diet, that it does not agree with all persons. That idiosyncrasies unfavourable to its ~~common~~ employment do sometimes ~~ex~~ exist, I cannot deny. But

Such cases are extremely rare, so much so that I have scarcely if ever met with any one of the kinds. It is also objected to milk, that it curdles on the stomach, and is sometimes specially rejected. But this will not be advanced against the practice for which I am contending, ~~the~~ if it is considered, that in the process of healthy digestion, the 1st. step is to coagulate the milk when it has been received into the stomach. The fact is, that though it may disagree with some persons at first, and be rejected by vomiting, yet by persisting in its use for 2 or 3 days, it will afterwards be retained & produce all the good effects above ascribed to it. By Dr. Cadogan in his treatise on the gout it is stated, that when milk disagrees with a patient on the ~~1st.~~ first trials, it is a certain sign that the further employment of the article is demanded. I firmly believe this to be the case. By continuing the milk, we place the stomach in that condition which is most calculated to receive healthy impressions. But when this fluid cannot be given on account of the prejudices of the patient, or from any other cause, we should resort to Chocolate. This is the remedy next in importance

to milk. Prepared, however, in the ordinary manner, it is very offensive to the stomach. The proper method of making it is as follows. Boil the chocolate in water, and after having allowed it to cool, skim off the fat on its surface. Reboil it, and pour it on sugar and cream. You thus get rid of the oily matter, and prepare a palatable beverage. But if neither of these articles can be taken, we should direct our patient to breakfast on the light and digestible kinds of solid food. Tea & coffee should both be entirely prohibited: I have never cured a patient who persisted in using them. The dinner must consist of beef, mutton, the white flesh of poultry, (as that of fowls & turkeys,) the different kinds of game, and oysters. Neither pork, nor veal, nor geese, nor ducks, nor fish are to be allowed. Salt, and smoked provisions, as ham, dried beef &c. are ordinarily injurious. It is a common opinion among practitioners that soups & broths are of easy digestion. But, whatever may be the case in a sound state of health, nothing is better established, than that they are inadmissible in Dyspepsia. They are exceedingly apt to become sour on the stomach. The only vegetables which are at all allowable

* Notes of Last year.

are potatoes, and well boiled rice. - The potatoes should always be roasted. Every species of dessert. When bread is allowed, it should be toasted, and without butter.

But as regards diet some other & more precise rules are necessary. 1st. Enjoin it on your patient to eat frequently, and not much at a time.* (The stomach, like a school boy, whenever it is unemployed, is doing mischief. Keep it therefore occupied, and for this purpose, direct your patient to eat 5 or 6 times during the day; it will even be proper that he should be roused up once or twice in the night for the purpose of taking nourishment. If this last caution be neglected, he will feel much more unpleasant in the morning.) 2nd. The articles of food should not be combined, but should be as simple as possible. 3rd. Little or no drink should be allowed at meals. - ~~Ato~~ Many cases of dyspepsia are attended with a voracious appetite. Often, however, there is a total want of it; and it becomes necessary by every means in our power to sharpen & invigorate the desire for food. 1st. Never let the patient know what he is to eat; but endeavour to surprise him by some nice little article. 2nd. That he may not be

disgusted with the smell of the food, it should in general be served up cold. 3rd. Let the dishes always be small; as nothing is more unpleasant to a feeble appetite than the sight of a large quantity of food. A patient with a delicate stomach will sometimes eat heartily out of a small dish, when he would entirely reject food presented to him in abundance. These remarks may appear frivolous; but in practice you will often find that important ends are gained by simple means.

As regards drinks, I believe, on the whole, that simple water is preferable. Now & then I have seen old porter beneficial; but generally it does harm. Wine, however old & sound it may be, is uniformly pernicious. Weak Do Spirits, and brandy and water are sometimes useful; and where the patient has been in the habit of using them, must be allowed. But whatever kind of drink may be prescribed, it must be used sparingly. This is a point of great importance; as, by deluging the stomach, we shall entirely defeat our views. —

In some of the more obstinate and protracted cases of Indigestion, much advantage may be derived from remedies applied to the system generally. The warm bath employed twice a week is highly useful. It acts not only as a tonic, but also by inviting disease from the

stomach, to the surface of the body. — The cold bath in other instances produces similar effects, and on the same principle. Confessedly exercise, and especially on horseback, is of the highest utility. Many are the cases of Indigestion, in which, unaided by any other remedy, it has completely effected a cure. But walking is also beneficial, and should not be neglected. To obtain the full effect of this remedy, it is advisable to send your patient on a long journey. It is also proper to recommend him to go to some watering place, where he may be benefitted not only by the amusements in which he will mingle, but also by the mineral waters, which, being generally chalybeate, act as a tonic to the stomach. The best are undoubtedly those of Saratoga & Ballston, in the State of New York. — Too little attention has been paid to clothing in the treatment of Indigestion. Every practitioner must have perceived how ~~close~~ strong a sympathy exists between the ~~stomach and surface~~ alimentary canal, and the surface of the body. It is important to keep up the due degree of warmth in the latter part, and for this purpose, flannel should be worn both in winter & in summer. Every one is aware of its utility

in the bowel affections, and it is certainly not less beneficial in complaints of the stomach. I have already remarked how liable dyspeptic persons are to cold feet. These are, indeed, one of the principal avenues, through which this disease makes its inroads. When there is the slightest disposition to Indigestion, habitually cold feet will hardly ever fail to bring it on. To guard against ~~the~~ such a consequence, woolen stockings should be worn; and sometimes, to irritate the soles of the feet, red-pepper should be sprinkled over them. Shoe makers wax spread on leather or linnen, may be used for the same purpose. This, in many cases, has relieved & sometimes altogether cured Indigestion, and even Amaurosis has been known to yield to such simple treatment.—

But what will all our remedies accomplish, unless the remote causes be removed? We should inculcate on the patient, ~~to a~~ the necessity of abandoning entirely those habits and practices, which directly or indirectly tend to the production of the disease. If intemperate, he is to become sober; if luxurious & voluptuous, he must institute a thorough reform in his scheme of living;

if indolent, he should be awakened to enterprise & industry; if studious, he should abandon the midnight lamp; if afflicted, or calamitous, he must be upheld with the promises of hope, and the gilded prospects which are stile before him. In the greatest emergency there is ~~a prospect of~~ always some hope of a cure; and never in this, or in any other case, surrender your patient to despair. I repeat what I said on a former occasion, — the resources of our art are abundant; & ~~while any~~ you should recollect the maxim, that while any thing remains to be done, nothing, no nothing has been accomplished.

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Under this head other diseases might be added: but as the effects of these diseases are displayed more in other parts of the body, I shall arrange them in ~~different~~ other classes.

2nd. Diseases of the Bowels.

1. Enteritis

L.

My next object is to consider the complaints of the bowels. Of these the 1st. which presents itself is Enteritis, or inflammation of the ~~bowels~~ Intestines. Much, however, of which I should otherwise have to say, has been anticipated by my remarks on Gastritis. The two complaints resemble each other in almost every particular. They are produced by the same causes, are marked by pretty much the same symptoms, & are cured by precisely the same remedies. All which I formerly observed on the danger of Gastritis, the rapidity of its progress, and the urgency for bold and decisive practice in that disease, equally applies to inflammation of the bowels. Nor can the pulse be trusted as a guide to practice. The only material difference between the two diseases, is, perhaps, the very great necessity of opening the bowels in Enteritis. Constipation, and sometimes of an obstinate & serious nature, is a common attendant on the disease before us. To remove this condition of the bowels, is our first & most important duty in the treatment of the case; because, if

permitted to continue, it would heighten every alarming symptom. It is very commonly recommended by practical writers, that in the early stages of Enteritis, a cathartic be employed, instead of purgative medicines. This advice is given under the supposition, that, by the harshness of their operation, purges might prove injurious. But not having seen this realized in actual practice, I presume that their apprehension influenced them, and act otherwise myself in the complaint of which we are treating. Commonly I prefer exhibiting calomel in divided doses, till the aggregate of the medicine shall amount to a considerable quantity; and if ~~the~~ its operation is protracted or tardy, I work it off with castor oil, or Epsom Salts. After the obstinacy of the constipation has been removed, the bowels are to be kept open by emollient glysters, or some mild laxative. As relates to the other parts of the treatment, I must refer you to what I have already said on Gastritis. To repeat my observations on the cure of that disease, would be superfluous recapitulation. After the bowels are freely opened in Enteritis, every part of the treatment is precisely similar. ——

2. Peritonitis.

Closely allied to the preceding disease, in many of circumstances, is inflammation of the Peritoneum. It is a case, however, much more insidious in its nature, and, not having attracted much attention, is comparatively little understood. The treatment being marked by some peculiarities, it demands a more particular consideration.

It is clearly ascertained that the peritoneum, is liable to an acute as well as chronic species of inflammation. Of these I shall treat ~~sp~~ seperately. The acute Peritonitis comes on with chills & shivering, which are in a short time followed by fever. The pulse is remarkably small, quick, and stunned, and, at this period, will calculate to deceive a practitioner as to the nature of the ~~disease~~ case. But, from the very commencement, there are certain symptoms, which, if not overlooked, cannot fail to awaken suspicion. There is a sense of heat and pain in the abdomen, sometimes confined to one place, though more commonly diffused, extending itself over the whole. By pressure the pain is greatly augmented, and a tenderness exists in every part of the abdominal parietes. Even at this early stage, the patient complains of thirst & some dryness of the tongue & fauces. Indeed, it is not among the least of

the peculiarities of the case, that from the dawn of the attack, these parts are affected as in Typhus Fever. This appearance, however, is not uniform. I have more than once seen a case, where the tongue, throat, and fauces were perfectly moist. — Such are the ordinary symptoms which usher in an attack. But in the course of 12 or 24 hours, or even in a shorter time, the tenderness of the abdomen is so much increased, that the pressure of the bed-clothes can hardly be borne by the patient. The pulse has a contracted feel, and beats from 100, to 120, 130, or even 140 in a minute. The tongue has become incrusted, and a considerable augmentation of the tension & swelling of the belly is apparent. Examined at this stage, the patient will be found lying on his back, with his knees drawn up. This should be attended to, as I never saw a case where it did not occur. The reason is exceedingly obvious. By this posture, the weight of the bowels is thrown on the back, and the abdominal muscles are relaxed, by which much relief is afforded; and one of the 1st. symptoms of approaching convalescence is the extending, by the patient of his lower extremities. If you find that he does this of his own accord, you may be certain that the danger is over, provided mortification has not occurred.

As the disease advances, all the symptoms increase, especially the tumefaction of the abdomen. It is not a rare occurrence, at this point, for the pain which before was excessive, suddenly to cease, as if relieved by the operation of some one of our remedies. But we should never construe this circumstance into an auspicious omen. I never knew it to take place, without being the precursor of death. Cotemporaneously, or nearly so, with this sudden subsidence of pain, there takes place a great sinking of the pulse, which is vastly increased in rapidity, so much so, that it can hardly be counted. Dark matter is now vomited, or rather expelled from the mouth by singultus, or a spasmodic effort of the stomach. Every second or two, the patient hiccoughs, and a mouth full of this dark matter is thrown up. In Peritonitis I have seen the black vomit 2 or 3 hours before death, exactly as it occurred in Yellow Fever. Cold, clammy sweats now break out; the extremities are cold & withered; the countenance of the patient collapsed & haggard; and at length difficult & laborious respiration marks the closing scene of life. We should be encouraged by a change only when it is accompanied with a gradual diminution of all the symptoms. — Dissections of those who have died of the disease,

clearly inform us of ~~the~~ its nature, or rather of ~~the~~ its seat and appearances. Every part of the peritoneum exhibits more or less ~~the~~ signs of inflammation, and its ravages, when ~~the attack~~ has been violent, or improperly managed. It is a curious circumstance, and worthy of remark, that in the portion of peritoneum which lines the parietes of the abdomen, inflammation does not extend beyond the membrane itself, and of course is never communicated to ~~the~~ muscles which lie anteriorly. The fact, however, is directly the reverse as regards ~~the~~ viscera contained within the abdominal cavity. I have seen the bowels not only inflamed, but even in a state of gangrene.

The only two diseases with which Peritonitis can be confounded, are Colic, and Inflammation of the intestines. Between these three affections there are so many points of resemblance, that much nicety of discrimination is necessary to ascertain which of them really exists. It is fortunate, however, that, in the early stages at least they demand ~~the~~ same remedies. The most unequivocal sign of Peritonitis, is that, ~~there is~~ whatever may be the degree of inflammation, there is no inclination to go to stool, and not the slightest mitigation of ~~the~~ symptoms, by the most copious alvine evacuations.

After the history I have given of the disease, there would seem to be little doubt as to the correct mode of treatment. But this is not the case. In no disease has there been more dispute, & difference of opinion. While it is alleged by some that the liberal use of opium is the only means of effecting a cure; others utterly deny its utility, and urge the lancet & depleting to its full extent. Nor is this difference confined to the lower orders of our profession. Many of the most eminent practitioners are arrayed on opposite sides of the controversy. The medical schools of London, particularly that of Surg. Hodgee, entertain peculiar notions respecting peritoneal inflammation; and their disciples maintain that opium is the appropriate remedy. It must be confessed that we are not well acquainted with the pathology of the case before us. Undoubtedly there is something peculiar in Peritonitis, and indeed, in ~~t~~ inflammation of any part of the alimentary canal. — But, theory apart, there can be no doubt as to the best mode of treatment. I have several times encountered the disease & have adopted a plan, with which I have good reason to be satisfied. Called in the very early stage, it is my custom to urge the lancet as far as possible, consistent with

the strength and other circumstances of the patient. I care not at all about the pulse. This is never active or strong; and is probably always depressed and feeble exactly in proportion to the violence of the attack; so that it rises as you deplete with the lancet. My only consideration is, that I have under my care a case of inflammation more rapid in its progress than almost any other, & if not timely arrested, inevitably fatal. Keeping this circumstance in view, I generally take 25 or 30 oz. at the first bleeding; and if this should not be productive of relief, I repeat the operation to the same extent, at the repetition of my visit. I have taken 60 or 70 oz. of blood in a day, from a person labouring under peritoneal inflammation; and do not believe that less would have answered. But simple depletion by the lancet will not always alone effect a cure. Either from the peculiarity of the inflammation, or from the seat of the disease being in the capillaries of the membrane, venesection or general bleeding often fails. It keeps the disease under, though it cannot extirpate, or completely cure it. When it is found that the lancet does not eradicate the complaint, it will be advisable to use topical bleeding, by leeches or cups to the abdomen

* Last year -

taking away as much blood as can be detracted by this means.

The next measure is to excite copious perspiration. This often operates as a charm in Peritoneal inflammation. I have known it again ~~again~~ and again used with unequivocal advantage, even when the symptoms seemed to demand the further use of the lancet. Diaphoretics, in this case, act by communicating a centrifugal ~~force~~ direction to the circulation, thereby drawing off blood from the capillaries of the peritoneum, and determining it to the surface of the body. To induce perspiration, we should confide most in the external means, and above all in the ~~use of the~~ vapour bath. The operation of this should be promoted or assisted by the internal use of Diaphoretics into which opium enters largely. The best, perhaps, is Dover's Powder. ~~It relates to Dissection~~ (* I once saw a case, in attending on which two of the most eminent practitioners of this city were engaged. They had taken 140 or 150 oz. of blood in the course of 48 hours, without having derived much apparent advantage. It was then proposed to excite a perspiration, and the vapour bath was employed. Hardly had the remedy begun to act, when the pulse became soft, and all the symp-

tons very much reduced. I have, from the termination of this case, been induced to resort to the diaphoretic plan early, but never till venaesection has been previously employed.)

As relates to the vesicating applications, there has not been less dispute than with regard to bleeding. Determining however from my own personal experience, I should say that blisters are very beneficial, when properly timed. They are always mischievous if applied in the commencement of the case. They should uniformly be preceded by the use of warm fomentations to the abdomen, and a good deal of direct depletion. The best mode in which the former can be effected, is by bread & milk poultices laid over the whole abdomen, or quite as well by common mush placed in a ~~ba~~ sack, which should be moderately full, so that it may adapt itself to the contour of the belly. It has lately been contended by a writer of authority in London, that poultices are as well adapted to deep-seated inflammations, as where it is situated on the surface. Whether the fact is exactly as he states it, I cannot take it on myself to declare. But of this you may be persuaded, that in inflammation of the bowels, and particularly of the peritoneum,

poultices not only afford great relief by assuaging pain, but also make a favourable impression on the disease.

It has already been remarked, that however great the pain may be, there is no desire to go to stool, and evacuations from the bowels afford no relief to the patient. But we should not undervalue them so much as entirely to overlook or neglect them. The bowels should be kept in a soluble condition either by mild laxatives, or by the use of enemata. When the latter articles are employed, they should be composed of mild ingredients, and administered in large quantities, so as to act as emollient applications to the intestines. As I have just stated, such is the practice laid down by all the by most if not all of the practical authors on this point. I allude to the inutility of purges. Influenced by the weight of this authority, I pursued the practice recommended, in all of the cases which have come under my notice. But I am not certain that it is sound doctrine or practice. There is no reason a priori to suppose that evacuations from the bowels are not as serviceable in Peritoneal inflammation as in any other of the Phlegmasiæ.

We also find that their utility is supported by a striking analogy. In Puerperal Fever they are most undoubtedly beneficial, and this is a case, to all intents and purposes, of peritoneal inflammation. Next to venaesection, by far the best method of contending with this fever, is by constant & copious evacuations from the bowels. I have now told you ~~my~~ what is the common practice, and my own doubts with regard to its correctness.

Peritoneal inflammation, let me repeat it, is a case even from the commencement replete with danger. It is so intrinsically, though the danger is increased by adventitious circumstances. In most cases the disease is well marked from the beginning; but sometimes irregularities occur, which are apt to mislead the practitioner, and divert him from the use of those remedies, by which it should always be managed. Now ~~then from~~ in the earliest stage there is so great prostration, and the pulse is so feeble, as to induce an apprehension that the patient is too debilitated to admit of direct depletion. This, you may rely on it, is a case of depression, or in other words, the disease is locked up in the system. But the energy of the body is so depressed by the overwhelming force of the complaint, that there is danger

of its not reacting; and, if blood be drawn away to any great extent, it would do harm, if not destroy the patient. In circumstances of this nature, it is my constant practice to endeavour to rouse the energy of the system, and for this purpose I prefer the warm bath, diaphoretics, and small & repeated bleedings. After a while the case becomes more developed, and then with perfect safety and an great advantage we may resort to the more copious use of the lancet. —

There is also a case of the disease of an opposite nature, not less dangerous, from the false security which it creates. It comes on with a slight tenderness of the abdomen, little or no fever, and a pulse not very different from its natural condition, being rather quicker, & very slightly chorded. Three or four cases of this kind have fallen under my observation, and I have not been aware of the danger, till I saw the black matter vomited. a train of the most alarming symptoms appear. The system became suddenly depressed; the pulse sunk; the surface was covered with a cold, clammy sweat; and a discharge of black matter took place from the stomach. When we meet with the disease commencing in this way we are not to entertain less apprehension.

Chronic Peritonitis.

In the commencement of the lecture I also mentioned that Peritoneal inflammation also occurs in a Chronic form. This is a very obscure & ill defined case of disease. In some instances it approaches for weeks or even months, without being attended with any one symptom or circumstance, calculated to excite observation, or to cause a suspicion of its real nature. All that is experienced in the commencement of an attack, is some occasional soreness of the abdomen, perfectly distinct from flatulence, or tormina, or the uneasiness of the bowels. The pulse, however, is commonly accelerated, & the tongue somewhat furred in the morning. Thirst is complained of, though no ~~extend~~ suffusion of heat on the surface of the body is apparent. On the contrary, the face is pallid, and indicates much languor & distress. The patient continues up, pursuing his ordinary avocations; till by some cause the disease is excited into action, and the case becomes one of acute inflammation. This is more dangerous, than any other form of the disease; because we are forced to restrict ourselves in the employment of depleting remedies, on account

of the preceding matters. Of all cases of disease, no matter what the complaint may be, the most dangerous are those in which an acute ~~inflammatio~~ supervenes on a chronic inflammation. The vessels by the preceding disease, ~~are so~~ have been so strongly confirmed in wrong action, that it is exceedingly difficult to restore them to their natural condition. We see the fact exemplified in Pulmonary Consumption, Hydrocephalus, Mania, and other diseases. All that can be done in chronic Peritonitis, is to treat the case in the acute stage, exactly as if it had originated in this way. — But when we have reason to suspect the existence of the complaint, before it has ~~b~~ become active, we should endeavour to arrest it by venaesection occasionally employed, by perfect rest, & by the whole antiphlogistic plan strictly & religiously pursued. By such means, the disease may be prevented from progressing, & the life of the patient probably saved. ——

[L.] I neglected in the proper place to speak of the spirits of Turpentine in Peritonitis. It has been the practice for many years in this city, to resort to the medicine just mentioned, with the view of checking vomiting in malignant fever. But the application of the remedy ~~for to the~~ for the purpose of checking

gangrene is of later date. It is only 12 or 18 months since I first employed it under the circumstances alluded to; and I have had great reason to be satisfied of its powers. In looking over some recent publications, I found a small pamphlet on the Puerperal fever, in which the author, a physician of Dublin, recommends the spirits of Turpentine, as by far the most efficacious remedy in that disease. He administered it even in the early stage. I do not think it applicable at this ~~point~~ period of the fever; but exactly at that point when inflammation is about to terminate in gangrene. It believe it to be an excellent medicine. It is most commonly recommended & employed in minute doses, of 10, 15, & 20 drops at a time. It is hardly necessary to mention that in such small quantities, it is wholly inefficient as to all useful purposes in the case before us. When I give it, I do not prescribe less than a table-spoon-fule every 2 & 3 hrs. This quantity was also employed by the writer above mentioned. Be not surprised at the magnitude ~~of~~ of the dose. In the cases Tenia, and other worms, the medicine has been given in the dose of 2 oz. This I have done myself, & the individual experienced no other effect than from a glass of ardent spirits. ~~The~~ It was swallowed with equal facility, & did not create more warmth in the stomach. When, therefore, you encounter Peritonal inflammation under the circumstances I have mentioned, & the remedies fail, you should resort to the spirits of Turpentine.

3. Colick

~~This is a very~~ Continuing our account of the bowel complaints, we come next to the consideration of ~~a~~ colick. As you all know, this is a very common and distressing affection, and, from the violence of its attacks, calls into requisition for its cure, all the resources of our profession. It is defined by most Nosologists to be — a painful distention of the lower region of the abdomen, and a twisting sensation round the navel, accompanied with vomiting, constipation, and a spasmodic contraction of the abdominal muscles. By some writers on Nosology, colick is divided into a number of species, ~~and~~ with a preposterous degree of minuteness. But, as regards practical convenience, and this should always be consulted, I suspect that all the forms of colick may be arranged under the three following heads: — 1st. Flatulent colick; 2nd. Bilious colick; 3rd. Colica Pictonum. —

Flatulent Colick

This may be pretty certainly known by the wind or flatus that attends it, and also by the causes by which it is produced. This species of colick* almost always arises from eating indi-

gestible food, as cabbage &c.; or is excited by cold applied to the surface of the body, or by cold extremities, especially the feet. When it proceeds from indigestible matter, the stomach is uniformly troubled with sickness, vomiting, and spasmodic pain. The cure of the disease is clearly pointed out by nature. We are to assist the stomach in relieving itself of its offensive contents, which may be done by giving plentiful draughts of camomile tea, or warm water. This end being accomplished, we are next to calm irritation, & relieve the pain, by the administration of cordial, carminative and anodyne remedies. To meet this particular indication, we may use warm toddy, ether, Hoffman's anodyne elixir, and laudanum united with a little essence of mint, or some other essential oils. — But when the disease has been produced simply by cold, we are to proceed directly with the remedies just mentioned, without premising evacuations from the stomach. Application of warmth to the surface, under such circumstances, conduces to the comfort of the patient, & sometimes essentially to his relief. The applications may be made to the feet, stomach, and abdomen; & consist of heated bricks, bottles filled with boiling water, or bags containing heated salt, sand

ashes, or oats. These last accommodate themselves more to the contour of the parts, and on that account are preferable. After the pain has been relieved, & the irritation of the stomach allayed, it will be right to attempt to open the bowels, with the view of obviating a relapse, & confirming the recovery. But as I shall hereafter be more particular as to the means of effecting this, I shall say nothing more respecting it at present. In dismissing, however, the consideration of flatulent colick, I wish to impress on your attention the difficulty which often attends the management, and the danger to which the patient is sometimes exposed. The vomiting is occasionally tremendous, and especially when the stomach has been much irritated. I have seen the Iliac passion induced by eating cabbage, in which the fecal & stercoraceous matter was vomited up in abundance. This was is the only instance of the kind which ever came under my notice. The occurrence is extremely rare, & before I witnessed it, I entertained strong doubts as to its existence. I need hardly tell you, that in this, as in all similar instances, the patient died. —

4

(6.) The Bilious Cholick

The Bilious Cholick, of which we are now to treat, is a disease endemial to our climate, more especially to the Southern states. It has been correctly considered by many medical authors as a Bilious Fever thrown in upon the bowels. Now & then it ~~is produced by~~ arises from other causes, though more generally it ~~arises~~ is produced under precisely the same circumstances with the fever just mentioned. ~~The two diseases~~ It occurs at the same season, ~~both are~~ is always introduced by a chill, and attended with prodigious accumulations of bile, & high arterial action. There is an excruciating pain about the umbilicus, which is aggravated by the constant retching, & vomiting incident to the case. The symptom which, according to Dr. Rush, distinguishes it from every other species of cholick, is the chill by which ~~it is introduced~~ the attack. This is an uniform occurrence in Bilious cholick, never, as far as I know, being absent.

The treatment may be briefly stated. As it is ~~an~~ highly inflammatory disease, and attended with spasm of immoderate action, venaesection is imperiously demanded, & should, in violent cases of the complaint, always take precedence

of the other remedies. By very copious bleeding in the commencement of the case, I have seen the disease entirely arrested, or so much so as to give little further trouble. But the lancet must not be sparingly employed. It will be right in the adult subject to take at once 20 oz. of blood. Even if we do not gain all that I have stated, we guard against subsequent inflam^n of the bowels, & facilitate, in a great degree, the operation of other remedies. The last is not the least in its advantages. By bleeding a surface which had been before locked up, is laid open to the action of ~~remedies~~ medicines. — The leading indication in Bilious cholick is to open the bowels, which, in most instances, are obstinately constipated. To accomplish this, cathartics would seem ~~to be~~ obviously to be the proper remedies. But such is the turbulence of the stomach, that medicines of this description cannot always be retained. We should, therefore, endeavour to calm the irritability of that organ by some one of the means already pointed out. The best are undoubtedly lime water & milk, & anodyne injections. — Much has been said of the utility of opium in this complaint the commencement of this

complaint. In some instances it undoubtedly proves serviceable, though on the whole it is a precarious remedy. In many cases opium will be rejected as soon as it is swallowed. But from its great advantage when it can be retained, we should always resort to this medicine in the commencement of an attack. But in making use of opium, it should be recollected by you, that given in substance, & particularly in the form of a pill which has been long kept, it is more efficacious than laudanum, or opium in a recent condition. Much more advantage, however, will be derived from the administration of opium by the rectum. — Among our resources in this stage the warm bath must not be overlooked. The effect is always highly pleasant to the patient, and though it does not uniformly check vomiting, yet it does so occasionally, & the patient recovers even while in the bath. It should always be tried —

These remedies failing, we are again to detract blood, and copiously too; and at the same time should administer aperient glysters. These may be constituted of equal portions of oil, molasses, & common salt, in a pint of water. But there are articles which

* Last yea

will give much greater activity to this injection. One of them is a strong infusion of senna. A pint or more of this thrown up the rectum, will generally overcome the most obstinate constipation. If greater activity is demanded, you may add a drachm or more of the powdered jalap. Not the least beneficial injection, is the Turbinthinate, especially in flatulent cholick. The method of preparing it I have already told you, while treating of ~~Typhus fever~~ Bilious fever.

A highly useful remedy when the bowels are obstinately constipated, is a pint or more of very cold water or even ice water injected up the rectum, It is also efficacious when dashed on the abdomen or extremities. This was a favourite remedy of the late Dr. Rush, and I have seen it used with advantage in many cases. — When all these have failed tobacco has been much confided in.* (But it should never be employed except in extreme cases. The sedative effect of the article is so great that the vital energies are sometimes suspended or even destroyed. I have seen one of my patients so low from the use of a small quantity of tobacco, that all my endeavours were required to raise him. I have wit-

repeat another instance of the same kind in the practice of Dr. Parrish.) There are two modes of employing the tobacco in injection, either in the form of an infusion, or of smoke. To make the infusion take 1 drachm of the tobacco to 1 pint of water. But the effects of even this small quantity are sometimes so alarming, that not more than ½ the pint, should be administered at once. A particular apparatus has been provided for injecting the smoke; but as this cannot always be obtained the common pipe will answer very well. Fill the bowl of the pipe, inflame the tobacco, and cover it over with a rag. Then introduce the stem into the anus, & blow through the bowl. You may thus administer the injection very effectually. To do away the danger which accompanies the use of Tobacco given in either of these methods, it has been proposed by Mr. Earle of London, to ~~use~~ substitute a suppository. By introducing a quill of tobacco, we can not only obtain its effects on the system, but can also remove it when these become dangerous. — I am happy to state, that in many instances, I have derived great advantage in cases of obstinate constipation, from

* Last year

Tartar Emetic given in the form of an injection. Twenty or 30 grains of that article, dissolved in 3 or 4 oz. of water, will often remove obstruction in the bowels, when other remedies have failed. An objection to it is, the extreme relaxation & debility which it produces. I was called to see a child who had attempted to swallow a large bolus of meat, which had lodged in his oesophagus. Not being provided with a probang, I injected 20 gr. of Emetic tartar, dissolved in water, up his nostrils. Complete relaxation was produced, and the meat descended into the stomach. In obstinate cases of obstructed bowels, I have administered as much as a drachm of the medicine. — The last method of overcoming constipation, is by mechanical distention, with tepid water.* (By an instrument invented by Dr. De Haen any quantity of liquid may be introduced at once: 3 or 4 quarts have sometimes been injected. This instrument differs from a common injecting syringe, only in having attached to it a tube, which is so contrived that the syringe may be alternately filled and emptied as often as you wish.) This resource I have seen repeatedly

ties, and not without advantage. —

But happily cases which would require this treatment are of rare occurrence. By the practice already stated, we may often allay purging, so as to admit of the administration of purgative medicines. It is usual to select the most active articles, & to prescribe them in the most liberal doses. But it is important for you to know, that in some instances the mild & laxative purges answer better. I have known one case, in which, after other ~~medicines had failed~~ more violent medicines had failed, the bowels were opened by a combination of the sulphuric & magnesia. There seems to be a certain relation between the powers of the medicine, and the state of the system which is graduated with the greatest delicacy. What operates well at one time, will fail at another, though given under apparently the same circumstances, and in the same manner. This arises from the want of what is called medical harmony. — Castor oil or Epsom salts are among the best purges in this case; but the favourite with me is a combination of opium & calomel. As a general rule I con-

2 grns. of opium with 12 or 15 of calomel every 3 or 4 hours, is the proper dose in cases of great danger. By uniting these medicines we obtain a great advantage. As soon as the opium begins to act, the spasmodic constriction will generally give way; and the calomel being thus suffered to operate, copious evacuations from the bowels take place, and the disease is entirely removed. By using opium in conjunction with calomel, the latter is also more apt to be retained by the stomach. You should cherish the recollection of this remedy. I have so often derived such great advantage from its use, that I wish to press it particularly on you.

As yet I have said nothing of blisters in the disease of which we are treating. They constitute, however, an indispensible part of the treatment. After the remedies above enumerated have proved totally ineffectual, you will find, in some cases, that the application of a blister large enough to embrace the whole abdomen, will succeed in removing the spasm, and thereby in putting an end to the disease.

(c.) Colica Pictonum

To conclude my account of colick, I shall now speak of the last species, or Colica Pictonum. This was at one time a common disease in this city; but within the last few years it has almost totally disappeared. It derives its name from the town of Pictu in France; and has also been called Devonshire colick, from the circumstance of its occurring more particularly in that county, than in other parts of England. At one time it was supposed that this disease arose exclusively from the fumes of lead. But it is now ascertained that there is a great variety of other causes, among which may be mentioned acid drinks, as lemonade, vinegar, & sometimes cider. The use of unripe or sour fruit, ~~flatulent~~ also flatulent vegetables, as cabbage, also exposure to cold, and accumulation of acrid bile in the stomach & bowels, may produce the complaint. But though all these may occasionally act as causes, yet by far the most common one, is the internal use of lead, or exposure to the fumes of that metal.

alum — gr ij or gr iij
⅛ or ¼ gr opium — 3 or 4 hrs
recommend, ~~highly~~ —
Soech Dattion — not speak
highly — (Op o Spec o D. Dat)
Rens intr. with chalk
Infusion of galls
Logwood — infus. — ℥ ¼
2 or 3 hrs —
Rubus villos o fruen.
bens — rest 10 to 14 days —
Change of air
If not residence side
Gens
not weaned with year

Procesforitin - daily
use of cold bath
Flannel - Rest keep
Diet - milk & farina

2. Colica Pictonum ~~commences~~ comes on, especially that form of it which is caused by lead, with a slow pain at the pit of the stomach, extending down to the intestines, with a twisting sensation around the umbilicus, eructations, nausea or vomiting, great thirst, anxiety, obstinate constipation of the bowels, and frequent though ineffectual desire to go to stool. The pulse from the commencement, in this case is very small, very quick, and hard; in which, as well as in some other respects, it differs from Bilious Colic. ~~wh~~ In the latter disease the pulse is full, strong, and voluminous, unlike that which we find in every other complaint of the intestines. After a short time the pain is increased in violence, the abdomen becomes sore to the touch, and the muscles contract into hard, irregular knots. The intestines are thrown into spasms, so as to prevent, in some instances, the introduction of enemata; and incessant vomiting of dark porraceous bile takes place. The head, in the more advanced stages is exceedingly distressed, and now come on nervous tremors, and more or less of paralysis. The eyes are particularly affected, and every variety of depraved

vision occurs in some cases. Double vision is not uncommon, and sometimes total blindness ensues.

The indications of cure in this complaint are pretty much the same as in Bilious Colic; and the remedies accordingly are not very different. Notwithstanding the condition of the pulse, all the late writers agree as to the propriety of early & copious venæsection. ~~We should~~ As there is greater danger in this than in the form of colick already treated of, we should push the lancet to a greater extent. We should next attempt to open the bowels. From considering the disease as merely a spasmodic affection, some writers prefer opium & the other antispasmodics to purgative medicines. There cannot be the slightest doubt of the efficacy of this practice in many cases. By the early administration of opium, a solution of the paroxysm is effected, and the bowels are afterwards readily evacuated. But in the generality of cases, I would combine opium with calomel, as in Bilious Colick. This failing, we should next employ in succession all the purgatives, & other means of removing intestinal obstruction, which I have already detailed to you. But in addition to these, much has recently been said of the power of cold applications in remo-

ving the obstinate constipation which attends that Colica Pictonum. They may be made either by in the form of cold water dashes on the abdomen & extremities, or by injecting this fluid indirectly into the bowels. I have not any doubt but that applications of this kind are, in many instances, exceedingly effectual. In this point we have the united testimony of the most respectable writers on the diseases of the West Indies. Castor oil, as perhaps you all know, has been almost consecrated to this particular case. It is greatly preferred by all the West India practitioners, (where the colica pictonum prevails to a great extent,) to almost every other purgative article. But though it is beneficial, yet, determining from my own experience, I cannot help thinking that it is infinitely less applicable to the case than combinations of opium & calomel. Owing, however, to the irritability of the stomach in this species of colic, we are often much disappointed in the use of purgative medicines. Under such circumstances, Epsom Salts, which have before been mentioned as lying on the stomach in cases of extreme debility of that organ, may be resorted to with unequivocal utility. It has lately been stated by

a writer of some authority, that great advantage may occasionally be derived, at this conjuncture, from the use of the volatile tincture of Gum Guiacum. He avers that it produces a solution of the spasm, and operates actively as a purge. It is not improbable that the fact is as he has stated with regard to this medicine. It is unquestionably true, in spasmodic affections of the stomach, and bowels which occur in retrocedent or misplaced gout, that the volatile tincture of guiacum, is among the most valuable of the remedies, which, in this case, can be employed to relieve spasm, and to procure evacuations from the bowels. To be effectual it must be administered in proper doses. Perhaps, in some instances, a table spoon full, or even an ounce might be advantageously given; but at all events not less than two tea-spoons full. — Much benefit, in Colica Pictonum, may be derived from blisters made large enough to embrace the whole surface of the abdomen.

The constipation of the bowels being completely overcome, the case appears in a much more manageable, and less alarming complexion. But with this desirable event

there is not always a total dissipation of the spasm. The reverse, indeed, most generally happens. To mitigate the pain, and carry off the remains of the disease, the treatment commonly adopted, is the combined use of opium & laxatives. Anodyne glysters are also valuable remedies. But at this stage, no slight confidence is, by some practitioners reposed in the employment of alum. This medicine is particularly extolled by Dr. Percival, who gave it in the dose of 10 or 15 grns. every 4 or 5 hours. — But still more is alleged of its efficacy by Mosely, who, however, prefers what he calls his vitriolic solution, consisting of a combination of alum & white vitriol. Exhibited in the dose of a table-spoon-full every 4 or 5 hours, the bowels having been previously opened, he informs us that it greatly relieves all the unpleasant symptoms, & confirms the convalescence. To prevent the recurrence, he advises that a table-spoon-full of the solution should be given ~~occasionally~~ in the morning for several days. — Of the efficacy of alum I can say nothing from my own experience. My practice, under the circumstances in which the writers above mentioned resort to alum, has been immediately to

apply to mercury, with the view of inducing salivation; and this, I believe, is now the established practice. It is nearly half a century, since it was recommended most strenuously recommended by Dr. Warren of London; and still more lately by Clutterbuck & other practitioners of that city, it has been highly extolled. It is, indeed, by far the most effectual of the remedies which have been tried in Colica Pictonum. As soon as the system is under its effects, or, in other words as soon as the mouth becomes affected, the whole of the unpleasant and painful symptoms are removed, as far at least as I have been able to judge. By salivation also, we effectually prevent the ~~salivation~~ paralysis, which is apt to supervene in this case; ~~It~~ and when it has once occurred, the same remedy is by far the best means of removing it.

My practice in Colica Pictonum may be summed up in a few words. It consists in the 1st. place of very copious venaesection; next of calomel & ~~paloj~~ opium in combination ~~as already mentioned~~ with the other means already mentioned as calculated to overcome the constipation of the bowels; next blisters to the abdomen; and lastly in the use of mercury

urge to salivation.

Colica Pictonum is one of those diseases, which having once occurred, are very apt to return. It is, therefore, incumbent on me to indicate to you the best means of prevention. These consist in steadily avoiding all the exciting causes, by a proper regulation of diet, by wearing flannel next the skin, and especially by keeping the feet ~~warm~~ very warm. It is also said, when there is a disposition to this complaint, that great utility may be derived from a flannel roller applied round the abdomen so as moderately to compress it. The principle on which it acts must be sufficiently intelligible to you all: - it imparts warmth to the stomach & bowels, and also creates a tonic impression. In Diarrhoea, and other ~~compl~~ diseases of the alimentary canal, I have long been acquainted with the efficacy of the flannel roller.

4. Cholera Morbus.

Copious discharges of bilious matter upward & downward, accompanied with painful gripes & spasms constitute this complaint. It is chiefly a disease of warm weather, though it occurs at all seasons, and in all climates. Like Bilious colick, and the kindred affections, it is undoubtedly a Bilious fever turned in on the bowels. In proof of this it may be stated, that they make their appearance at the same season of the year, are produced by the same causes, and are cured by nearly the same remedies. Now & then, however, Cholera may be traced directly to other circumstances, especially to irritating and indigestible matter taken into the stomach. But cases of this description are comparatively rare, and indeed do not occur at all, unless a considerable degree of predisposition exist.

Cholera morbus usually comes on with tenderness of the abdomen, pain, distention, & with those other symptoms already mentioned in delivering the definition. But as the disease advances, the pulse, which from the

commencement was weak & fluttering, becomes still more so; attended with great depression of strength; a damp, pallid surface; cold extremities; hurried respiration; great thirst; much restlessness, and gastric distress. Cramp, and other painful affections of the muscles of the extremities & abdomen also attend on this stage of Cholera Morbus. It has been remarked that cholera resembles many of the intestinal complaints; and the symptoms above enumerated show this to be the fact. But still it has some peculiarities, and need not be confounded with any other disease. It may be distinguished from colick by the total absence of constipation; and it differs from Dysentery, and Diarrhoea, in this, that the evacuations consist of pure bile, unmixed with blood, and feculant matter. Correctly speaking Cholera is a Gastric affection, as much so as any disease to which the stomach is exposed. The primary irritation is seated in this organ, and extended through the medium of sympathy to the Hepatic System. To this conclusion we are led from considering the causes of the complaint, which are either a constriction of the surface by cold, or a morbid impression made on the stomach

by means of intemperance or debauchery in eating & drinking, or by marsh effluvia. In further confirmation of the pathology here advanced, we may remark that the first discharges consist of the contents of the stomach; and bile is not thrown up till the biliary organs become secondarily affected. But when once placed under the morbid impression, the liver is stimulated to increased action; and hence arise those profuse biliary discharges which are always incident to the complaint. Nor have we the slightest reason to imagine that the bile is characterized by any unusual acrimony, as is alleged by some. On the contrary, considering that it is produced much more rapidly, and in much greater quantities, we should conclude that it has less of the acrid property, than the healthy bilious secretion.

Deducing the practice directly from the theory we have advanced, it follows that the only indication is the complete removal of the primary irritation situated in the stomach. But it sometimes happens, that, though the theory is perfectly correct, yet the practice is not directly derived from it. Of this we have numerous instances in medicine, & none more striking than

that which is before us. In a majority of the cases of Cholera Morbus, there is so copious a secretion of bile, and so great an accumulation of irritating matter of another nature, that these act as a new exciting, ~~and~~ or aggravating cause, and the complaint will not yield unless they be carried off. But occasionally we meet with cases, where the treatment may be reversed, and the palliative remedies, ~~as opium~~, precede evacuations. Every practitioner has seen cases ~~wd~~ in which, by administering opium at the commencement of the attack, & thus calming the irritation, he has been able at once to check the vomiting, & subdue the spasm & other unpleasant affections. Nevertheless, as the disease commonly presents itself, it is undoubtedly proper, in the first place, to rid the stomach of its contents. Most practitioners, to accomplish this end, ~~have~~ are in the habit of using diluent drinks. Either camomile tea, warm water, ~~or~~ weak chicken water, linseed-tea, or toast & water will answer exceedingly well; but they must be very copiously drank. So part of the practice of physick is more ancient than this mode of managing Cholera morbus. It may be truce

back to the remotest periods, and has been retained by the common consent of all practitioners. But whatever may be its merit, it was unquestionably dictated by false theory. Conceiving that the disease arose from acrimonious bile, the founders of this practice treated it exactly as if it were a case of poison. Why the stomach should be deluged with drinks, instead of emptied by an emetic, I have never been able to conjecture. The effects of the latter are much more powerful & constant. Influenced by this belief, I have prescribed emetics, & am can perceive no objection to their employment. Consulted in a violent case of Cholera Morbus, I direct immediately 20 grains of Ipecacuana, and that the operation of the medicine should be promoted by warm beverages. By the emetic the stomach is relieved, and the system, before depressed, now reacts, and a more open & manageable case of disease is presented. Ipecacuana not only evacuates the stomach, but also, by its antispasmodic power, ~~relax~~ induces a relaxation of the spasm.

In the next place we are to ~~remove~~ calm irritation, and remove the spasmodic pain. To meet

this indication, several remedies, ~~and~~ may be employed, the most important of which is indisputably venaesection. As in all other cases, this remedy must here also be regulated by the condition of the system. Bear in mind, however, that the pulse, in this case, is not ~~our only~~ always to be our guide. Whatever may be its feeblenes, if there is only an ordinary degree of vigour in the patient, the lancet may be safely urged. I have often bled when the pulse was exceedingly low, and have experienced striking benefit. As you evacuate you will find the system to rise. — It may be layed down as a general rule, without a single exception, that in the early stages of all diseases attended ~~attended~~ with much pain, if ~~the~~ you find the pulse weak, you are to consider it as indication of a depressed condition of the system, which will be most effectually overcome by the direct evacuants. But admitting this to be true, we are, nevertheles, to proceed cautiously with the lancet, either because the system refuses to react, or because the general circulation is so emptied by the accumulation of blood in the great viscera or deep seated parts, that ~~blood~~

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copious venaesection, under such circumstances, might create great prostration, & even endanger life. In one instance I absolutely saw the patient ~~dye~~ die under the lancet. We should, therefore, draw blood slowly, watching the effects produced, and allowing time for the recuperative & restorative energies of the body to ~~come into play.~~ be developed, & to come fully into play. In a doubtful case of Cholera Morbus, ~~the~~ it is right to precede the lancet by the warm bath. This is at all times useful, but especially so in the case before us. — By ~~the~~ general & widely diffused impression thus created on the system, ~~it~~ it hardly ever fails to rouse it out of its torpor & depression, to subdue irritation of the stomach, and to relieve spasm, and other symptoms incident to the case. Much has been said, and justly of the powers of opium in Cholera Morbus. It may be given early, or after evacuation from the alimentary canal. But in whatever stage it is employed, we shall derive greatest advantage from it in the shape of anema, repeated every 3 or 4 ~~times~~ hours. But when the prejudice of the patient, or other circumstances, render it necessary to admin-

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ister opium by the stomach, it should be preferred in a solid shape. — Cooperating to the same end, that is, to allay ~~pain~~ the irritable condition of the stomach, and relieve the pain, warm fomentations to the region of the stomach are always beneficial. The best of these is the bag of cloves prepared as formerly directed. Applications of this nature are always exceedingly comfortable to the patient, and in some instances are not without permanent utility. Most of the remedies calculated to allay vomiting may be prescribed; and lime & water & milk should always be preferred. But if these fail, a blister should be applied over the stomach; and if a decided tendency to sink be manifest, the same application should also be made to both extremities. As I have stated such is the best practice in Cholera Morbus. A large majority of cases readily submit to the remedies enumerated, when judiciously employed. But occasionally we have to encounter some violent cases, in which we must call into requisition, all the resources of our profession. I have known cases so rapid as to terminate

in 3 or 4 hours. Such cases, however, are very malignant shapes of the disease, and occurred only during the prevalence of Yellow Fever. In ordinary times, the disease occasionally terminates in 24 hours. I once saw a ~~case~~ case of Cholera Morbus, which arose from eating water-melons at noon; and all that medicine could do was unable to prevent a fatal issue before night. —

Cholera Morbus is exceedingly liable to recur. To guard against a relapse, all exciting causes should be avoided; as exposure to hot sun, and night-air; excess in eating or drinking; the use of improper articles of food; violent exercise; intemperate paroxysms of passion; & above all, cold extremities. Attention to the bowels is also demanded. These should be kept in a soluble condition by the occasional use of mild laxatives, as magnesia or castor oil; & tone should be imparted to the alimentary canal by means of the bitters. Of these the Quassia & Columba are to be preferred. The wearing of flannel next the skin, is also not to be overlooked in the prophylactic treatment of this disease. I do not know a better precaution in all cases of bowel complaints than that to which I have just alluded.

5. Cholera Infantum

By a very natural transition, we now pass from the consideration of Cholera Morbus to that of Cholera Infantum. The latter is a complaint almost peculiar to the United States. Children, it is true, in other countries are liable, during the period of dentition, to various affections of the alimentary canal; none of which, however, precisely resemble the endemick of our country. Much as has been written on the bowel affections, I have been unable to find any account, in a foreign author, of what I consider Cholera Infantum; except an imperfect notice contained in the work of Cleghorn, on the diseases of Minorca. Considering the immense mortality occasioned by this complaint, even the writers of our own country are strangely silent on the subject. — As far as I know, only 3 tracts have been published respecting it, the 1st. by Dr. Rush, the 2d. ~~By~~ by Dr. Jackson of Boston; & the 3rd. by Dr. Millar of New York. As the account of Dr. Rush is most neat & correct, I will read you this history he has given of the disease under consideration. —

"Cholera Infantum affects children from the 1st. or 2nd. week after their birth, till they are 2 years old. It sometimes begins with a diarrhoea, which continues for several days without any other symptom of indisposition; but it more frequently comes on with a violent vomiting & purging, and with a high fever. The matter discharged from the stomach & bowels is generally yellow or green, but the stools are sometimes slimy & bloody, without any tincture of bile. In some instances they are nearly as limpid as water. Worms are frequently discharged in each kind of the stools that has been described. The children, in this stage of the disease, appear to suffer a good deal of pain. They draw up their feet, and are never easy in one posture. The pulse is quick & weak. The head is unusually warm, while the extremities retain their natural heat, or incline to be cold. The fever is of the remitting kind, and discovers evident exacerbations, especially in the evenings. The disease affects the head so much, as in some instances to produce symptoms not only of delirium, but of mania, insomuch that the children throw their heads backwards & forwards, and sometimes make attempts to scratch, and to bite their parents, nurses, and even themselves. A swelling frequently occurs in the abdomen, and in the face & limbs. An intense thirst attends every stage of the disease. The eyes appear languid, & hollow,

and the children generally sleep with them half close. Such is the insensibility of the system in some instances in this disease, that flies have been seen to alight on the eyes when open, without exciting a motion in the eye-lids to remove them. Sometimes the vomiting continues without the purging, but more generally the purging continues without the vomiting, through the whole course of the disease. The stools are frequently large, & extremely fetid, but in some instances they are without smell, and resemble drinks and aliments which have been taken into the body. The disease is sometimes fatal in a few days. I once saw it carry off a child in four & twenty hours. Its duration is varied by the season of the year, and by the changes in the temperature of the weather. A cool day frequently abates its violence, and disposes it to a favourable termination. It often continues, with occasional variations in its appearance, for 6 weeks or 2 months. Where the disease has been of long continuance, the approach of death is gradual, and attended with a number of distressing symptoms. An emaciation of the body to such a degree, as that the bones came through the skin, bloody stools, a singultus, convulsions, a strongly marked hippocratic countenance, and a dose mouth, generally precede the fatal termination of this disease. Few children ever recover after the last symptoms which have been mentioned make their appearance.

The predisposition to Cholera Infantum consists in the debility, induced by the operation of the heated & impure air of large cities. The disease is excited by improper diet or clothing; and is often brought on or aggravated by dentition, worms, and a variety of other extraneous and adventitious circumstances. Distinct from the causes, and external phenomena, and symptoms of the complaint, dissections clearly reveal to us its nature & its seat. The brain exhibits no morbid appearances, and the viscera of the thorax are as little affected. It is on the contents of the abdomen that the disease expends its whole force. The effects of previous inflammation may be traced through the whole extent of the alimentary canal; but the mucous membrane is principally diseased. Dark, livid spots are to be seen on this coat, in the stomach or small intestines, but particularly in the Duodenum. The peritoneum is partially affected; though the appearances of disease are not very considerable in that membrane. As might be suspected, the hepatic apparatus ~~ma~~ is much deranged. The liver, as far as my observation has extended, is universally increased in size, and sometimes considerable altered in con-

dition. Very often it is indurated; but more generally it is soft & flabby in its texture. The Gall bladder is usually filled with bile, variously vitiated and altered in its nature. Of the spleen & pancreas not much is to be remarked, though they are occasionally described as being more or less affected. It would appear that this disease is very closely allied to that which we last described. Like that it is probably, in the commencement a gastric affection, and the hepatic system is sympathetically drawn into a state of disorder. All the evidence which can be collected from the causes, symptoms, phenomena on dissections, and plan of treatment, compels us to support such a view of the pathology of the case.

As already mentioned, the disease usually commences with a disordered condition of the alimentary canal. It is now very generally admitted that our earliest endeavours should be directed to the evacuation of the stomach & bowels. But as regards the precise course to be pursued to effect this purpose, there is by no means the same unanimity of opinion. Most generally purges, and especially castor oil are employed. Cases of a mild nature may undoubtedly be treated in this way. But in the more violent cases, attended with vomiting, it will be impossible to get

such medicines to be retained by the stomach. It is therefore required that we previously allay the irritability of that organ by anodyne injections, fomentations to the epigastric region, or by the use of the warm bath. After this indication has been properly fulfilled, we may resort to purges; & except in very young children, I am in the habit of giving calomel, combined with small doses of opium. The advantages of this over castor oil and other purgatives are, that from ~~the smallness~~ its insipidity, and the smallness of its bulk, it may be readily exhibited; and that, from its weight, it will remain on the stomach, even though vomiting be excited. These, in actual practice, are important considerations. To the advantages of this combination already mentioned we may add, that ~~it~~ as an evacuant it operates much more effectually, while, at the same time, the spasmodic uneasiness is either mitigated or wholly removed. All this is perfectly intelligable from the known effects of the calomel & opium.

Adapted as this treatment may be to the ordinary cases, it is not susceptible of universal application. Sometimes the disease is combined with such vehemence

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of gastric distress, as to preclude altogether the use of purges. Every minute almost there is violent vomiting, accompanied with thirst, pain about the umbilicus, febrile heat on the surface, and a very quick and very irritable pulse. What is to be done under such circumstances of the disease? There can be no doubt of the propriety of puking with ipecacuana. This, it is true, is not the customary practice, & in using it I go ~~con~~ counter to the sentiments of many respectable practitioners; but I am not influenced by such considerations when my experience tells me that I am right. — Emetics to check vomiting are always sparingly prescribed, & with no little solicitude & apprehension. What is the foundation for this alarm I cannot ascertain. Certainly, when there is no reason to suspect active inflammation of the alimentary canal, they may be safely & efficaciously employed. They relieve the stomach of its contents, & impart tone & strength to that organ, so as to prevent the recurrence of vomiting. But they do more. By determining to the surface, they invite diseased action from the internal parts, & equalize the action & excite-

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ment of the body.

As in every other bowel affection accompanied with fever & acceleration of the pulse, venesection in the case before us is imperiously demanded. Bear in mind the insidious character of the whole of these diseases, and particularly the marks of inflammation which dissections uniformly reveal to us in Cholera Infantum. Cases are of frequent occurrence in which the lancet is fatally neglected or omitted. It is common with me to bleed several times in the more violent cases; & uniformly, I believe, with unequivocal utility. Venesection frequently employed, is a remedy against inflammation; and its proximate or immediate effect is to tranquilize the child both as regards the stomach & general condition. But here, as in all other instances, you must regulate the lancet with a sound & discriminating judgment.

After the stomach has been prepared for their reception, much good may be derived from the mercurial purges. Calomel may be administered by itself, or in combination with opium, as already mentioned. It is infinitely preferable to the oil, and for reasons before stated. But when the prejudices against mercury are insurmountable, or we are forbidden

from using ~~for use~~ it, by ~~any~~ peculiarity of constitution, or any other cause, we should always resort to a solution of Epsom's Salts. This medicine is admirably adapted to all cases, attended with irritability of the stomach. It possesses some property, I do not exactly know what, which enables it to allay vomiting. But having once thoroughly evacuated the bowels, I would no longer employ purges, except in those cases where there was strong evidence of bilious accumulation, or some other vitiated matter in the alimentary canal. My conviction is, that in Cholera infantum, and the bowel complaints generally, physicians have urged purging too far. Cherishing, even at the present moment, the antiquated doctrine of morbid humours, ~~it is customary~~ many practitioners are accustomed to continue purges as long as any thing can be brought away. This they do under the impression, that the contents of the intestines are of an irritating nature, and while they remain, must continue the disease. The reverse I hold to be correct. It manifestly appears to me, that all the bowel affections originate in a primary irritation of the stomach & intestines,

and that the discharges which attend the complaint, are the effect of this primary irritation. Employ, therefore, such measures as are calculated to tranquilize the irritation, and afterward the purging will subside. —

Deducing my practice from this view of the case, after the bowels have once been freely evacuated, I resort to those medicines which quiet the ~~alim~~ existing irritation, and, at the same time, determine to the surface of the body. Combinations of opium, calomel, and ipecacuana are eminently calculated to meet this indication. As regards children, the following ~~is~~ are the proper proportions. —

Take of opium — grs. i
" " calomel — grs. ij
" " ipecacuana — grs. iij

Divide the whole into 8 powders, one of which may be given every one, two, or three hours according to circumstances. If the powders are too small add a little gum arabic. When the pain & irritation are violent, and the evacuations are frequent, augment the quantity of opium, or, what is still better, resort to anodyne injections. These, in severe cases, should be repeated every 3 or 4 hours. By this means we very speedily calm the irritation of the bowels,

and as soon as that is removed, the other symptoms subside or disappear.

In entering fully into my plan of managing this disease, I am much attached to those remedies which make a direct or forcible impression on the skin. Independent of its diaphoretic property, the warm bath is an important remedy. In Cholera infantum there is generally ~~great~~ great inequality of temperature. While one portion of the body is parching hot, another is icy cold. The same symptom also occurs in the Cholera of advanced life. By immersion in the warm bath, we equalize the temperature, and diffuse a glow over the surface, while other not less signal advantages are obtained. As, however, the effect is evanescent, the bath should be repeated daily, and sometimes twice a day. It may be rendered more effectual, and especially when there is a tendency to sinking in the child, by the addition of salt, mustard, cayenne pepper, bitter herbs, or, what will answer still better, brandy or other ardent spirits. By this means you may excite an increased action in the cutaneous vessels, & ~~to~~ withdraw disease from the internal parts. — As cooperating to the same end, blisters should not be neglected. They may be employed in almost every

stage; and should be applied to the stomach, abdomen, or extremities, according to the circumstances of the case. —

After a few days, in some instances, and, in others, after as many weeks, or even months, the disease passes into a diarrhœa, attended with tormina & tenesmus. It is usual, at this conjuncture, to find the stomach greatly debilitated, with a total loss of its powers of digestion, & so irritable as hardly to retain any nourishment. The remedies generally resorted to under such circumstances are the alkaline, & cretaceous preparations. They may be prescribed as follows. —

Take of cret. prep. or powd. oyster shells - ℥ ij
" laudanum ——— gutt. XV
" loaf sugar ——— ℥ j -
" cinnamon water, mint water, or common water - ℔ iij

~~Or, if~~ To these may be added a few drops of the oil of peppermint, if common water is employed. The dose is a desert-spoon-full every 2 or 3 hours. — Or, if you prefer the alkali, the following is a good formula. —

Take of salt of tartar ℥ j
" laudanum — gut. XV.
" sugar ——— ℥ i.
" water ——— ℔ iij.

A little peppermint may be added. The dose is the same with ~~the preceding~~ that of the preceding mixture. —

*last year 40 grns

†last year 10 drops

Rhubarb may also be resorted to with great advantage. I will tell you the best mode of administering it. —

Take of Rhubarb — grn. X.
" Calcined magnesia grn. XXX.*
" Laudanum — gut. XV.
" Oil of anises — gut. VI.*
" Loaf sugar — ℥ j. —
" Water — ℥ iij.

The dose is a desert-spoon full at the intervals before stated. This preparation is particularly calculated to overcome the tormina & tenesmus which are apt to occur. — Connected with the disease in this stage there is sometimes much acidity & ~~irritation~~ great intestinal irritation. One of the best preventives is the following. —

Take of castor-oil — ℥ i
" loaf sugar — ℥ i.
" the whites of 2 eggs.

Rub down the whole together till a complete mixture is formed; then gradually add, stirring ~~at the time~~ same time, 5 oz. of lime water & 20 drops of laudanum. — This will often remain on the stomach when oil in every other shape would be rejected. The preparation is admirably calculated to meet the indication which it is intended to answer. But when the irritation is excessive

nothing but the anodyne injection will be found to succeed.

As the complaint advances, it bears all or most of its painful symptoms, and a diarrhoea ensues, attended with such profuse evacuations, that the child has from 10 to 30 or even 40 stools in 24 hours. But as the treatment in this case, is the same as in the diarrhoea of grown persons, I shall postpone an account of the remedies till I come to treat of that disease. There are, however, some remedies more particularly adapted to children, and of these I will briefly speak. Of the mineral astringents, the only one from which I have derived much advantage is alum. Given in the dose of 2 or 3 grains, combined with from $\frac{1}{8}$ to $\frac{1}{4}$ of a grain of opium, every 3 or 4 hours, it produces very beneficial effects in this case. The Saccharum Saturni has been greatly recommended of late years. I have tried it again & again, & from my personal experience, can say nothing in its favour. No advantage is derived from its use, and by its astringent operation it is apt to occasion severe pain. A combination of chalk with the tincture of Kino; or of the infusion of galls united with Laudanum, is worthy of our attention. Colomba in powder or infusion is much employed, & well deserves its reputation. The Hæmatoxylon Campechianum

*Last year

num, or common ~~Logwood~~ Logwood, as an astringent in this stage of Cholera Infantum, is much used by many practitioners of this city. It may be administered in the form of an infusion, in the dose of a dessert-spoon full every 2 or 3 hours. It is a favourite remedy with Dr. Physick. But, of all the remedies in this case, the most decidedly efficacious is a strong infusion of the rubus, or in common language the Black-berry, or Dew-berry root. ~~This is an agreeable~~ (* The root of this plant is an agreeable aromatic, and the most powerful astringent with which I am acquainted. It is eight years since it came to my knowledge. It had long been employed as a popular remedy, but never before that time, as far as I know, by any regular physician. It not only lies comfortably on the stomach, but is so active as in a few doses to put an end to the complaint. So powerful, indeed, is its astringency, that it is often necessary to prescribe laxatives after it.) To prepare it, take 1 oz. of the bruised root, & pour on it a pint of boiling water.

But after all the only sovereign remedy, & one attended with uniform success, is a change of air. As long as the child continues in the city, & is exposed to the operation of all those causes which produced the complaint,

we may palliate or suspend the attack; but we shall hardly ever effect a permanent cure. Relapse or relapse will occur, till the child, ~~[illegible]~~ worn out by the repeated attacks, will sink under the disease. Much advantage ~~may~~ will be derived from sending your patient into the country in any stage. It is even asserted by Dr Rush, that during a practice of 50 years, he lost only 2 or 3 of the ~~patients~~ children whom he had sent into the country. My own experience will not allow me to go quite so far; but it must be admitted that no other remedy is sufficient. As soon as the child gets into the free air of the country, you may often observe a very beneficial change in its condition. Even while it was yet in the carriage, I have known a great alteration for the better to be experienced. — But when a country residence cannot be commanded, it will be proper to order that the child should be taken to ride, or should be ~~carried~~ carried out of the city once or twice every day. — Another remedy of great importance, when the child cannot be removed into the country, is to expose it ~~to~~ to the air of the river, or especially to the motion of a boat or other vessel. I have come within my own observation to see very great advantage, even in the worst forms of cholera infantum,

derived from carrying the child twice a day across the river. The incessant vomiting & purging which attend the disease have been entirely checked by this simple remedy.

To prevent a disease so difficult a cure, and so destructive of life and happiness, becomes with us a high & paramount duty. I will, therefore, indicate the prophilactic plan of treatment, which, in the experience of practitioners has been found most successful.

1st. Never permit the child to be weaned within the year. No food is so salutary at this period as the mother's milk. The remark has been made by all the physicians of this city, that where children are kept to the breast a long time, they are not apt to be attacked with Cholera: but, on the contrary, such hardly ever escape it, ~~when then~~ as are nourished on spoon victuals ~~altogether~~, or are very early weaned.

2d. Where a predisposition to Cholera is supposed to exist, you should recommend strongly the ~~cold~~ daily use of the cold bath. This acts not only by preserving cleanliness, but also imparts tone by direct sympathy to the alimentary canal. The cold bath, however, does not always agree with the child: ~~Said~~ in this case you may resort to the warm bath, and with equal advantage.

3d. You should direct the wearing of flannel next the skin, & the use of worsted stockings. The greatest benefit is experienced by grown persons ~~and~~ affected with bowel complaints, from this practice; and not less in children. It is common to deprive the child not only of stockings, but also of shoes. This custom is very dangerous. I have sometimes cured the complaint by ordering that the patient should wear worsted stockings. —

4th. Pay particular attention to the diet of the child. Let it eat sparingly of fruit; & let unripe or unwholesome fruit be wholly excluded. The proper diet of a child is milk, & farinaceous substances, as arrow-root, powdered rice, tapioca &c. What are called spoon victuals are also suitable: these are made of biscuit ground down & boiled in milk. After a few months, the child should be accustomed to a little animal food. The ~~alim~~ powers of digestion will thus be strengthened, and tone imparted to the alimentary canal generally.

5th. During the process of dentition, the gums should often be examined, & if swollen or inflamed ~~they~~ should be frequently & freely lanced. The influence of the process of dentition over the whole economy of the child, uniformly predisposes to Cholera & other bowel affections. I have seen violent convulsions, hydrocephalus, and a cough so ~~violent~~ obstinate as to be taken for con-

ruption, all produced by difficult dentition. - There is a common prejudice against lancing the gums, arising from a belief that the tooth will meet with greater difficulty in being protruded through the cicatrix. But this is not true. ~~The cicatrix is more readily absorbed than any other part~~ The tooth is not protruded through the gum, but this is generally removed by absorption; and we know that a cicatrix is more readily absorbed than ~~the same~~ original structure. -

After all, if you wish your patient to recover, you must send it into the country. But if, either on account of poverty or other cause, a residence out of town cannot be commanded, let your patient be carried once or twice a day over the river, or exposed in every way to pure air. -

It is a curious fact that this city of late has been nearly exempt from Cholera infantum. Three or 4 years ago I had ~~2 or~~ two or three hundred patients annually with this disease; and lately I have not attended more than 6; so much has the complaint diminished among us. Whether this is owing to the increased purity of the air, to the coldness of the weather, or to the introduction of Schuylkill water; such is the experience of every practitioner of Philadelphia. —

Those blessings of our early youth,

Why are our wants so very few?
Because we nature's calls pursue.
Whence our complacency of mind?
Because we act our parts assign'd.
Have we incessant tasks to do?
Is not all nature busy too?
Does not the sun with constant pace
Persist to run his annual race?
Do not the stars which shine so bright,
Renew their courses ev'ry night?
Does not the ox obedient bow
His patient neck, and draw the plough?
Or when did e'er the gen'rous steed
Withhold his labour or his speed?

COTTON.

SECTION VI.

The Dove.

Reas'ning at ev'ry step he treads,
Man yet mistakes his way,
While meaner things, whom instinct leads,
Are rarely known to stray.

One silent eve I wander'd late,
And hear'd the voice of love;
The tender dove address'd her mate,
And sooth'd the list'ning dove:—

"Our mutual bond of faith and truth,

SECTION II.

Peace and Love recommended.

Let dogs delight to bark and bite;
For God has made them so;
Let bears and lions growl and fight,
For 'tis their nature too.

But, children, you should never let
Such angry passions rise;
Your little hands were never made
To tear each other's eyes.

Let love thro' all your actions run
And all your words be mild;
Live like God's well beloved Son,
That sweet and lovely child.

His soul was gentle as a lamb;
And as in age he grew,
He grew in favour both with man,
And God his Father too.

The Lord of all, who reigns above,
Does from his heav'nly throne,
Behold what children dwell in love,
And marks them for his own.